Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Effective October 1, 2003											00	85
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	LE	NTITY	OR	•	R THAN ENTITY
TOTAL CLAIMS			10.				RAT	E	FEE	ם ר	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA	BASIC		<del>                                     </del>	OR		<del> </del>
TOTAL CHARGEABLE CLAIMS					*		XS :			1	<del></del>	
INDEPENDENT CLAIMS			minus 3 = * (			0				OR	X\$18=	
MULTIPLE DEPENDENT CLAIM P			<del></del>			<del>{                                    </del>	X43	=		OR	X86= ^	sey.
							+145	5=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ТОТ	AL.		OR	TOTAL	1114	
CLAIMS AS AMENDED - PART II											OTHER	
	(Column 1) (Column 2) (Column 3)						SMA	LL E	ENTITY	OR	SMALL	
AMENDMENT A	·	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= ,,	X\$ 9	=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X43:	-	·····	OR	X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	$\dashv$			000	
										OR	+290= • TOTAL	
		TO' ADDIT. F			OR ,	ADDIT. FEE						
		(Column 1)	Γ -	(Colum		(Column 3)						
AMENDMENT B	<del></del>	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9:	-		OR	X\$18=	
ME	Independent	*	Minus	***		= .	X43=	1		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM			$\dashv$				
							+145:			OR	+290=	
				•			ADDIT. F			OR ,	TOTAL ODIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)				٠		·
Z ŀ		REMAINING AFTER AMENDMENT	·	NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	1		OR	X\$18=	
	Independent	*	Minus	***		=		+				
۷ [	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X43=	+		OR	X86=	
	Ab						+145=			OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								E		OR A	TOTAL DDIT. FEE	
T	he "Highest Nur he "Highest Num	mber Previously Paid ber Previously Paid	ia For" (Total or	SPACE is I Independen	less than t) is the l	13, enter "3." highest number			opriate box			